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Application Number	10/693,338
Filing Date	10/24/2003
First Named Inventor	DWORZAN
Art Unit	3764
Examiner Name	Fenn, Matthew
Attorney Docket Number	DWCRZN, 002A

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	William S. Dworzan		
Date	7/28/06	Telephone	714 771-0524

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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